



Secretary of State
Kim Wyman



Washington Talking Book & Braille Library

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FAX (206) 615-0437 • wtbbbl@sos.wa.gov • www.wtbbbl.org

Application for Free Institutional Library Service

Name of Facility _____

Staff Contact _____

Address _____

Street (or P.O. Box)

Suite

_____, Washington _____

City

ZIP Code

Telephone (_____) _____ Extension _____

Email Address _____

☐ Email me a username/password for the online catalog.

Number of persons unable to use regular printed material who will be served:

Talking Books _____ Braille _____ Large Print _____

Institutions, such as hospitals, nursing homes, and rehabilitation centers, which regularly serve clients meeting the eligibility requirements on Page 2, can apply for free library service. Registered institutions may borrow books and equipment in order to:

1. Demonstrate the service to new library users.
2. Provide library service to eligible short-term residents. (Long-term residents should be registered for individual library accounts.)
3. Use in group activities with residents who cannot use standard print.

Public libraries may also borrow talking book equipment for demonstration purposes and can establish a deposit collection of large-print books.

In compliance with RCW 42.56.310, application information is confidential and will be used only in relation to your library service.

Alternate Contact Information

Please give the name of a contact to use if the primary person cannot be reached:

Name _____ Telephone (____) _____

Certification of Eligibility

An administrator must sign below, certifying that the named institution serves persons who are unable to read or use standard printed material because of one or more of the reasons below and that the reading materials and equipment will be used by such persons only.

- ☐ **Blindness.** Visual acuity of 20/200 or less in the better eye with correcting lenses, or whose widest diameter of visual field subtends an angular distance no greater than 20 degrees.
- ☐ **Visual Impairment.** Inability to read standard printed materials without special aids or devices other than regular glasses.
- ☐ **Physical Disability.** Inability to turn pages or comfortably hold a book for extended periods of time as a result of physical limitations.
- ☐ **Deafness and Blindness.**
- ☐ **Reading Disability.** Reading disability, resulting from organic dysfunction, of sufficient severity to prevent reading of printed material in a normal manner.

Please note: *Federal law (36 CFR 701.10) mandates that only doctors of medicine or osteopathy are allowed to certify cases of reading disability.*

Certifier Signature

Printed Name

Title and Occupation

Address

City

State

ZIP Code

(____) _____
Telephone

Date

Books and Equipment

All books and equipment are sent and returned through the mail free of charge. Please select below the services you would like to receive. If you have multiple residents that desire their own talking book players, they should be registered for individual accounts.

Talking books:

- ☐ Send me books on digital cartridge and a digital player needed to use them.
_____ *Number of digital players needed (No more than 1 for every 4 users)*
- ☐ Contact me with information on downloading digital recorded books.

Send me these optional attachments:

- ☐ Headphones for private listening. *Number needed* _____
- ☐ A pillow speaker for listening in bed. *Number needed* _____
- ☐ An application for an amplifier with headphones for the hearing impaired.
- ☐ A breath-activated switch for individuals with limited or no dexterity.

Braille books:

- ☐ Send me braille books. *Number needed* _____
- ☐ Contact me with information on downloading Web-Braille books.

Large-print books:

- ☐ Send me large-print books. *Number needed* _____

Evergreen Radio Reading Service:

- ☐ Listen online at www.wtbbl.org (high-speed Internet connection required).
- ☐ Send me information on where I may purchase a special radio to get the over-the-air signal in the Seattle, Spokane and Tri-Cities radio listening areas.
(The library does not have radios available for loan.)

Equipment policy: Playback equipment and special attachments are supplied to eligible persons on extended loan. If this equipment is not being used in conjunction with reading material provided by the Library of Congress and its cooperating libraries, it must be returned to the issuing agency. Your cooperation with returning these items in a timely manner is appreciated.

Reading Preferences

Please check preferred listening/reading levels:

- ☐ Adult
- ☐ Young Adult/High School
- ☐ Junior High
- ☐ 4th-6th Grade
- ☐ Kindergarten-3rd Grade
- ☐ Preschool

Indicate the types of books to be sent:

Favorite subjects and genres: _____

Favorite authors: _____

Special interests: _____

List any languages, other than English, in which you would like to receive books:

Please call or email the library at any time with special author, title, or subject requests, or if you have questions about your service. We look forward to serving you.

Choose one option for receiving books:

☐ **I wish to have the library select books for me.** The library will send books from the categories you indicated above, or from requests you send us. Each book you send back will automatically be replaced. You may receive a call from the library to talk about the kinds of books you would like to receive.

☐ **I wish to receive only books I request.** You will need to call us with lists of requests from our bimonthly catalog of new books or make requests through the online catalog in order for us to replace the books you return. No books will be sent if there are no requests in your file.